

Electronic Filing System (EFS) Data  
Electronic Patent Application Submission  
USPTO Use Only

EFS ID: 54196  
Application ID: 10707912   
Title of Invention: Push-on Connector Interface  
First Named Inventor: Jim Wlos  
Domestic/Foreign Application: Domestic Application  
Filing Date: 2004-01-23  
Effective Receipt Date: 2004-01-23  
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Filing Type: new-utility  
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Certificate Message Digest: 0b96ba92a9f3df933318bcefe50dde640c584fca

PATENT APPLICATION SERIAL NO. \_\_\_\_\_

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
Fee Record Sheet

01/26/2004 FFANAEIA 00000027 502327 10707912

01 FC:1001 770.00 DA

PTO-1556

(5/87)

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

6707917

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS	<u>17</u>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<u>17</u> minus 20=	* <i>(Handwritten)</i>
INDEPENDENT CLAIMS	<u>7</u> minus 3 =	* <i>(Handwritten)</i>
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE

OTHER THAN  
OR SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
X\$ 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
X\$18=	
X86=	
+290=	
TOTAL	770

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus		
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

SMALL ENTITY

OTHER THAN  
OR SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL	

RATE	ADDI- TIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL	

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus		
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE

RATE

ADDI- TIONAL FEE
X\$ 9=
X43=
+145=
TOTAL

ADDI- TIONAL FEE
X\$18=
X86=
+290=
TOTAL

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus		
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/>		

RATE

RATE

ADDI- TIONAL FEE
X\$ 9=
X43=
+145=
TOTAL

ADDI- TIONAL FEE
X\$18=
X86=
+290=
TOTAL

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.